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From: Imran A. Khaliq

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Attorney Docket No.: 24730030
Group Art Unit: 3632
Examiner: G. Wrenn Baxter
Serial No.: 09/712,837
Filing Date: November 10, 2000
Inventors: Robert D. STUDDIFORD et al.
Title: ACCESSORY MOUNTING APPARATUS

Papers enclosed herewith:

1. Transmittal Form - 1 page
2. Fee Transmittal Form + duplicate copy for fee processing - 2 pages
3. Extension of Time Request (Three Months) - 1 page
4. Amendment in Response To Non-Final Office Action - 10 pages
5. Supplemental Oath/Declaration under 37 CFR 1.175(b)(1) - 3 pages

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PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0851-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/712,837	
	Filing Date	November 10, 2000	
	First Named Inventor	Robert D. STUDDIFORD et al.	
	Art Unit	3632	
	Examiner Name	G. Wrenn Baxter	
Total Number of Pages in This Submission	19	Attorney Docket Number	24730030

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form + duplicate copy for fee processing - 2 pages <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply - 10 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request - 1 page <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Supplemental Oath and Declaration under 37 CFR 1.175(b)(1) - 3 pages 2. Facsimile Cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MAYNATT, PHELPS & PHILLIPS, LLP (Customer No. 36614)	
Signature		
Printed name	Imran A. Khaliq	
Date	February 5, 2007	Reg. No. 55,325

CERTIFICATE OF TRANSMISSION/MAILING

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Signature		
Typed or printed name	Sheena Hicks	Date February 5, 2007

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4518). FEE TRANSMITTAL for FY 2006		Complete If Known		
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/712,837	
		Filing Date	November 10, 2000	
		First Named Inventor	Robert D. STUDDIFORD et al.	
		Examiner Name	G. Wrenn Baxter	
		Art Unit	3632	
TOTAL AMOUNT OF PAYMENT		(S)510.00	Attorney Docket No.	24730030

METHOD OF PAYMENT (check all that apply)

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00

2. EXCESS CLAIM FEES

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
26	- 30 or HP = 0	x 25.00 = 0.00
Indep. Claims	Extra Claims	Fee (\$)
3	- 4 or HP = 0	x 100.00 = 0.00

HP = highest number of total claims paid for, if greater than 20

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2253 Extension for response within third month

510.00

SUBMITTED BY

Signature

 Registration No. 55,325
 (Attorney/Agent)

Telephone (650) 812-1316

Name (Print/Type) Arman A. Khalil

Date February 5, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS OFFICE.